

# Ovarian mature cystic teratoma associated anti-NMDAR encephalitis: A case report

Siah HL<sup>1</sup>, Ab Rahim AG<sup>1</sup>, Hairel Z<sup>1</sup>, Ibrahim A<sup>2</sup>, Noranizah W<sup>3</sup>, Laile S<sup>4</sup>, Hamdi AC<sup>5</sup>

<sup>1</sup>Obstetrics and Gynaecology Department, Hospital Pakar Sultanah Fatimah, <sup>2</sup>Medical Department, Hospital Pakar Sultanah Fatimah, <sup>3</sup>Pathology Department, Hospital Pakar Sultanah Fatimah, <sup>4</sup>Radiology Department, Hospital Pakar Sultanah Fatimah, <sup>5</sup>Neurology Department, Hospital Sultanah Aminah

## ABSTRACT

**Introduction:** Anti-N-methyl D-aspartate receptor (anti-NMDAR) encephalitis is a rare but potentially fatal disease. It is an autoimmune disorder, and some may be associated with a tumour. We present a case of ovarian teratoma associated anti-NMDAR-receptor encephalitis to draw attention to this condition. **Case Description:** A 21-year-old, female with no prior medical illness presented with status epilepticus and required intubation. There was history of fever, headache and increasing forgetfulness prior to the presentation. She was treated as meningoencephalitis. However, her fever persisted despite antibiotic and antiviral therapy and her conscious level decreased. There was also orofacial dyskinesia. Further evaluation demonstrated the presence of anti-NMDAR antibodies in her cerebrospinal fluid (CSF) and a computerized tomography (CT) scan detected a left ovarian teratoma. Diagnosis of ovarian teratoma associated anti-NMDAR encephalitis was made. Immunotherapy began and a laparotomy was performed to remove the teratoma. Histopathological examination (HPE) confirmed mature cystic teratoma and brain tissues were seen. She had a slow recovery but eventually survived and was able to perform activities of daily living independently. There was no recurrence of disease up to her last follow up 4 years later. **Discussion:** Mature cystic teratoma is the commonest germ cell ovarian tumour. It is a benign tumour however it can be fatal when associated with anti-NMDAR encephalitis. Identification and removal of ovarian teratoma along with immunotherapy therapy improved the outcome of this patient.

**Keywords:** encephalitis, autoimmune encephalitis, anti-NMDAR, teratoma

# Late ovarian pregnancy – A near missed diagnosis: A case report

Noor Afidah Mohamed Suboh, Fazlin Harun, Nur Afidah, Noor Haliza Yussoff

Department of Obstetrics & Gynaecology, Hospital Tunku Azizah (Women & Child Hospital), Kuala Lumpur

## ABSTRACT

**Introduction:** Ovarian Pregnancy is a rare condition, with an incidence of advanced ovarian pregnancy being exceptional. Establishing diagnosis of ovarian pregnancy is a challenge, especially in later trimester. **Case Description:** We report a case of a 26-year-old, Gravida 3 Para 2 Indonesian lady who was first seen at 35 weeks gestation with intrauterine demised fetus. She had previously delivered two uncomplicated vaginal birth. Unfortunately, she does not seek antenatal care throughout this pregnancy. Induction of labour was initiated to facilitate the delivery process. However, despite two cycle of prostaglandin induction, labour was not established. Reassessment revealed a normal non pregnant size uterus with a separate mass containing the demised fetus. Diagnosis of extrauterine pregnancy was made and she underwent exploratory laparotomy. A salphingo-oophorectomy was done, and a 2.37 kg baby were delivered in toto. **Discussion:** This case fulfilled all the Spielberg Criteria. As the incidence of ovarian pregnancy is on the rise, high index of suspicion is needed in establishing diagnosis.